TACTICAL RESPONSE REPORT/Chicago Police Department

	4 PATE	OF INCID	CNT	TIME		In Appendi	OS OCCUPAC	NCE		***************************************			000000000000000000	72	LOCATION	CODE	14	BEAT/OCCU	-	
		OCT-20		1	34:00	2. ADDRESS OF OCCURRENCE 3522 W GRENSHAW ST CHICAGO, IL 60624							3.	3. LOCATION CODE 289			1133			
4 <u>D</u>	5 POSITION B LAST NAME						7 FIRST NAME				8. STAR NO. 9. SEX			[]as r	10. RACE CODE 11 AGE			12. HT 13 WT.		
MEMBER INVOLVED	9161 GOZDAL III 14 DATE OF APPT 15. EMPLOYEE NO					MATTHEW W 16 UNIT & BEAT OF ASSIGNMENT				9220 01 M 02 P				F WHI 6		_ , ,	2.30			
ZZ		P-200	7			21 EIDST M	011		1133	22. M.I		01 On [02 Off	RACE	/es	02 No	×.	1 Yes 26, HT.	27, W	2 No
SUBJECT	20 LAST NAME 21 FIRST N MCCALUM JEFFR								D.					25. 0.0.	.		506		60	
											MED/FIREARM - SEMI-AUTOMATIC				31. SUBJECT INJURED? 32 SUBJECT AL					
	22 11115	IFOLOU, TOCA	∑ 01 Yes				***************************************				01 Yes 02 No 01 Yes				02 No					
	33, WHERE WAS MEDICAL TREATMENT OSTAINED?						34 BY WHOM?			30	5. CONDITION 01 Apparently 03 Hospitalized 04 Not			-	y Normal 02 Under I Hospitalizad 05 Refused Me					
Z Z	36. CHAR	RGES PLA	CED								DNA 37. CB N			37. CB NO.	i0. IR NO.			DNA		
38.	PASSIVE RESISTER						IVE RESISTER	ASSAILANT:ASSAULT			Т	ASSAILANT BATTERY			<u> </u>	ASSAILANT:DEADLY F				
F FORCE	ري دري	DID NOT FOLLOW VERBAL DIRECTION			FLED			IMMINENT				ATTACK WITH WEAPON		USES FORCE LIKELY TO CAUSE DEATH OR			×	***************************************		
	SUBJECT'S ACTIONS	STIFFENED		PULLED AWAY		OF BATTERY OTHER				ATTACK WITHOUT		Ğ	GREAT BODILY HARM			×				
	ACT NB	(DEAD WEIGHT)					OTHER				OTHER			OTHER						
				<u> </u>		OPEN HAND	STRIKE		ELBOW STRIKE				KNEE STRIKE				FIREARM		<u>-</u>	
REASON FOR USE O (Check all that apply)	ESCORT HOLDS WRISTLOCK		FERBAL COMMANDS			TAKE DOWN / EMERGENCY HANDOUFFING			CLOSED HAND								OTHER			
OR I				OC CHEMICAL WEAPON CANINE			.STRIKE/PL				KICKS		Ш							
N N	CONTROL INSTRUMENT			TASER (Probe Discharge) TASER (Contact Stun) TASER (Spark Displayed)						IMPACT MUNITION (Describe in Box 40)										
EAS(
<u> 2</u> 9		W/AD	HEMICAL WEAP THORIZATION R	·ON	ا نــا	OTHER			OTHER _											
39.	· OC/CHE		ÉAPON AUTHO	RIZED BY (NA	ME)			40 AE	DDITIONAL IN	FORMATI	ON							***************************************		
\boxtimes								SE	MI AUTO	MATI	380A0	CP.								
DNA	POSITION	N		STAR NO	L	UNIT														
F								42 INCIDENT OCCURRED 43. LIGHTING CONDITIONS D1 David							HI 44 WEATHER CONDITIONS					
CE	41, WEAPON TYPE 04 SEMI-AUTO PISTOL 01 REVOLVER 05 CHEMICAL WEAPON					☐ Indoors ☐ Outdoors ☐ O2				Night 03 Dawn 04 Dusk			4 Dusk	CLEAR						
Ή	02 RIFLE 06 TASER (Probe Dischar				arge) 45. MAKE/MANUFACTU			URER 48 MODEL						TH	48. CALIBER/GAUGE					
DISCHARGE INCIDENT	O3 SHOTGUN 07 OTHER				TO SHAMINITH THE TOTAL															
SCH	49 TASE	R DART II	3 NO		50 WEAP	ON SERIAL NO	o. (Include Letters	s)	51. CH	ICAGO G	JN REG. NO)	52. IL F	TREARM O	WNER ID. N	o	53 HAND	GUN CERTIF	ICATE N	Э.
	54 SPECIAL WEAPON CERTIFICATE NO. 55, PROPERT				ERTY INVENT	RTY INVENTORY NO. 56. TYPE OF AMMUNITI			MUNITION	ON USED 57.NO. OF WEAPONS DISC THIS MEMBER.			NS DISCH	CHARGED BY 58. TOTAL I			NO OF SHOTS MEMBER			
WEAPON	69 WHO FIRED FIRST SHOT ☐ D3 OTHER (SPECIFY) 60 WAS					60 WAS F	FIREARM RELOADED 81. NO OF CARTE			F CARTER				MRER'S HA				ER (Specify) 경		
WE	DURING IN					NCIDENT SHOT SHELLS 01 YES 02 NO RELOADED				01 RT. SIDE (WAIST)				02 LT, SIDE (WAIST)			in (opocity)			
		ABER'S HANDGI DE DRAW 🔲 0	64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD						ĈŜ. DIO MEMBER USE SIGHTS ☐ 01 YES ☐ 02 NO				-	¹ № 277						
		000000000000000				DOORWAYS, (CAR, FURNITUR	E, ETC)	8						R WHEN F	RST SHC	T WAS FIR			1527703908
	24 GE 63	ON/OBJE	OT STRUCK AS	RESULT OF T	HE DISCHA	PGE OF MEM	BERS WEAPON				T. D				FT. C			TAUR!	-	908
		PERSON			03 BOTH		UNKNOWN				3 🗌 04 K					<u>а</u> [] о	z Erind Do		Ŀ	
72.	NOTIFICATIONS (OC OR TASER INCIDENT):														71. R.D. NO					
CASE INFO.	NOTIFICATIONS (FIREARM INCIDENT): DEMC DSS/DIST. OF OCCUR & OCIC DET. DIV.														100	, S				
SIGNATURES IN	000000000000000000000000000000	3000000000000000	100000000000000000000000000000000000000		uired n	otification	s and all w	000000000555555	000000000000000000000000000000000000000	000000000000000000000000000000000000000	оорроссоссоссос	000000000000000000000000000000000000000	umente	ed in the	approp	nate ca	ase rep	ort.		<u>Z</u>
	73. RÉPORTING MEMBER (Prof Name) STAR/EMPLÔYEE NO. SIGNATURE GOZDAL III, MATTHEW W 9220														HY448947					
	04-OCT-2015 21:24:14 Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.													4	347					
	74 REVIEWING SUPERVISOR (Print Name)						nd completeness of this report a STAR NO. SIGNATURE								irea into re Reviewa				-	•
)is			JOHN A				2523								-OCT-2					
CPD-11	.377 (R	EV. 3/0	8)				000000000000000000000000000000000000000	00011100006111000			***************************************		100baacaacaacaacaacaa		10	G#		0	770	728
															~ V	w //	770700 to 10000			

Attachment 11

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER, 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

Trial times concluded that the second	TO THE TOTAL OF THE PROPERTY OF THE LOS OF COMME			
S. LIEUTENANT OR ASOVEDOIC RATIONALE FOR SOX 77 PHIDING Bassed on the information available at the time, it is the preliminary determination of the undersigned that P.O. GOZDAL acted in accordance with Departme Policy. P. LIEUTENANT OR ASOVEDOIC FINDING BASED LPON CURRENTLY AVAILABLE REPORTATION INVANCE CONCLUDES THAT THE INSIGERS ACTIONS WITH IN COMMANCE WITH GREATMENT PROCEDURES AND PRECTICES. LIGG NO VIRNOOSTANICE DATE DOMPLETEDTIME THE PLANT OR ASOVEDOIC (HIGH HIGHE) INVANCE ONLY THE STAN EVENT IN BEHAVIOR OF THE PLANT OF	'5 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE	DNA	REFUSED	INTERVIEW NOT CONDUCTED (Specify Reason)
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